

## Jefferson County Human Services

### Appendix B: CLTS Waiver Program Requirements

[Provider Name Here]

#### A. Children's Long-Term Support Waiver Service Descriptions

##### **Adaptive Aids**

Adaptive aids include items, controls, or appliances that enable the child or youth to increase their ability to perform activities of daily living, and successfully access, navigate, and participate in their home and community.

##### **Adult Family Home**

The adult family home service provides individualized treatment, supports, and services above the level of room and board for one to four people living together in a residence.

##### **Assistive Technology and Community Aids**

Assistive technology and communication aids are items, pieces of equipment, product systems, or services that increase, maintain, or improve functional capabilities of children at home, work, and in the community.

##### **Child Care Services**

Child care services ensure the child's or youth's exceptional physical, emotional, behavioral, or personal care needs are met during times when their family members are working, pursuing education and employment goals, or participating in training to strengthen the family's capacity to care for their child.

##### **Children's Foster Care**

Children's foster care services are allowable for a child who is placed in a residence operated as a foster home by a person licensed under [Wis. Stat. § 48.62](#) and [Wis. Admin. Code ch. DCF 56](#).

##### **Community Integration Services**

Community integration services assist, empower, and build upon the strengths of the child and family so the child can be fully integrated into the community with their family.

##### **Consumer Education and Training**

Consumer education and training services help the child or youth and their family acquire skills to exercise control and responsibility over their other supportive services.

##### **Counseling and Therapeutic Services**

Counseling and therapeutic services maintain or improve the health, welfare, and functioning of the child or youth in the community.

##### **Daily Living Skills Training**

Daily living skills training services provide education and skill development or training to support the child's or youth's ability to independently perform routine daily activities and effectively use community resources.

##### **Day Services**

Day services include coordination and intervention to target skill development and maintenance for youth.

##### **Financial Management Services**

Financial management services assist the child or youth and his or her family to manage the Children's Long-Term Support (CLTS) Waiver Program services and funding.

##### **Home Modifications**

Home modifications maximize a child's or youth's independent functioning in their home through services to assess the need for, arrange for, and provide modifications and/or improvements to the home.

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### **Housing Counseling**

Housing counseling provides comprehensive guidance about options for a youth to obtain or retain safe, accessible, and affordable housing in the community that meets their needs and preferences.

### **Mentoring**

Mentoring services improve the child's or youth's ability to interact in their community in socially advantageous ways.

### **Nursing Services**

Nursing services assist a child or youth with health and health-related tasks in the child's home and community.

### **Personal Emergency Response System**

The personal emergency response system (PERS) service secures an immediate response and access to assistance in the event of a physical, emotional, or environmental emergency.

### **Relocation Services**

Relocation services assist with preparations for the child's or youth's relocation to a safe and accessible community living arrangement.

### **Respite Care**

Respite care services maintain and strengthen the child's or youth's natural supports by easing the daily stress and care demands for their family, or other primary caregiver(s), on a short-term basis.

### **Specialized Medical and Therapeutic Supplies**

Specialized medical and therapeutic supplies maintain the child's health, manage a medical or physical condition, improve functioning, or enhance independence.

### **Support and Service Coordination**

This service includes coordinating or facilitating access to all services and supports, both formal and informal, which are needed by the child and family to meet their identified outcomes.

### **Supported Employment—Individual**

Individual supported employment services assist a youth to attain sustained employment paid at or above minimum wage in an integrated setting in the general workforce, in a job that meets the youth's personal and career goals.

### **Supported Employment—Small Group**

Small group supported employment services assist a youth to attain sustained employment and work experiences that foster further career development and individual, integrated community-based employment, in a job that meets the youth's personal and career goals.

### **Supportive Home Care**

Supportive home care (SHC) directly assists the child or youth with daily living activities and personal needs, to promote improved functioning and safety in their home and community.

### **Training for Parents and/or Guardians and Families of Children with Disabilities (Training for Unpaid Caregivers)**

Training for parents and/or guardians and families of children with disabilities provides support and strategies to help increase methods for coping and learn techniques to manage challenges and to promote achieving an inclusive, interdependent, and self-empowered life.

### **Transportation**

Transportation maintains or improves the child's mobility in the community and increases their inclusion, independence, and participation in the community.

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### **B. Provider Standards and Documentation**

#### *General Provider Standards*

All CLTS Waiver Program providers must be screened for the following:

- Compliance with the provider standards and qualifications outlined in the service descriptions in the Medicaid Home and Community-Based Services (HCBS) Waiver Manual for the CLTS Waiver Program for each service the provider will deliver, as documented on a child's or youth's ISP.
- U.S. DHHS Office of Inspector General List of Excluded Individuals and Entities
- Caregiver background checks, when applicable.

Caregiver background checks are an important part of assuring the health and safety of children and youth enrolled in the CLTS Waiver Program. Children with disabilities are more likely than children without disabilities to be socially isolated and experience abuse and/or neglect. Additionally, the nature of a child's disability may decrease their ability to defend themselves from abuse or neglect, escape an abusive situation, and/or report abuse or neglect. Caregiver background checks help mitigate risk to health and safety for children and youth enrolled in the CLTS Waiver Program. The requirement for the completion of caregiver background checks applies to all service providers, paid or unpaid, who provide services listed on the ISP and who meet the definition of a caregiver. Caregivers are those persons who have regular, direct contact with a child or youth participating in the CLTS Waiver Program. "Regular" means contact that is scheduled, planned, expected, or otherwise periodic. "Direct" means face-to-face physical proximity to a participating child or youth that allows the opportunity to commit abuse or neglect or to misappropriate their property.

- Providers are subject to required licensing and credentialing verification, caregiver background checks, and hiring prohibitions described in Chapter 4. Current documentation of licensure, professional certification, and caregiver background checks must be maintained by the provider and be accessible for review.
- For more information related to CLTS Waiver Program service providers, refer to the CLTS Provider Registry page: <https://www.dhs.wisconsin.gov/clts/provider-registry.htm>

### **C. Children's Long-Term Support Waiver Program Service Rates Initiative**

The Wisconsin Department of Health Services (DHS) has distributed the statewide uniform rate schedule for specific services. The rate schedule shows the maximum amount a CLTS provider can be paid for each service by unit.

As a CLTS provider, you are responsible for determining your usual and customary costs, otherwise known as the amount it costs you to provide the service. If your actual cost is lower than the amount in the CLTS rate schedule, services must be paid at your usual and customary rate. You must follow all terms and conditions as documented in the CLTS Waiver Provider Medicaid Agreement.

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## CLTS Service Rate Schedule

SPC	FPC	Benefit Category	Code Description	Unit Type	Tier 1	Tier 2	Tier 3	Tier 4
Community Integration Services								
514.00	H2021HN	Community integration services - tiers	Community-based wraparound services, per 15 minutes	15-min.	12.50	N/A	N/A	N/A
514.00	H2021HO	Community integration services - tiers	Community-based wraparound services, per 15 minutes	15-min.	N/A	21.25	N/A	N/A
Supported Employment								
615.01	T2018U7	Supported employment—individual	Habilitation, supported employment, waiver; each	Month	\$200/month, less than 10 hours worked per week	\$400/month, 10 to less than 15 hours worked per week	\$600/month, 15 to less than 20 hours worked per week	\$800/month, 20+ hours worked per week
615.02	T2019U7	Supported employment—small group	Habilitation, supported employment, waiver; per 15 minutes	Month	\$150/month, less than 10 hours worked per week	\$300/month, 10 to less than 15 hours worked per week	\$450/month, 15 to less than 20 hours worked per week	\$600/month, 20+ hours worked per week
Financial Management Services								
619.00	T2040U7	Financial management services -basic	Financial management, self-directed, waiver; per 15 minutes	Month	35.00	N/A	N/A	N/A
619.00	T2040U722	Financial management services - enhanced	Financial management, self-directed, waiver; per 15 minutes	Month	N/A	71.71	N/A	N/A
619.00	T2041U7	Financial management services; rep payee – basic	Supports brokerage, self-directed, waiver; per 15 minutes	Month	35.00	N/A	N/A	N/A
619.00	T2041U722	Financial management services; rep payee - enhanced	Supports brokerage, self-directed, waiver; per 15 minutes	Month	N/A	71.71	N/A	N/A
Transportation								
SPC	FPC	Benefit Category	Code Description				Unit Type	Unit Rate
107.40	S0215	Transportation & Escort	Non-emergency transportation; mileage, per mile			Miles		0.58
Adult Family Home								
SPC	FPC	Benefit Category	Code Description			Unit Type	Unit Rate	
202.01	S5140U6	Adult family home placement, 1-2 beds	Adult Family Home Placement. (S5140=Foster care, adult; per diem)			Day	298.04	
202.02	S5140U7	Adult family home placement, 3-4 beds	Adult Family Home Placement. (S5140=Foster care, adult; per diem)			Day	177.89	
Counseling and Therapeutic Services								
507.03	G0176	Counseling & therapeutic services	Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)			Session	85% of provider's usual and customary rate, up to \$170 per visit	

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Day Services						
706.20	S5105U7	Day Services, Children	Day care services, center-based; services not included in program fee, per 15 minutes	15-min.	2.50	
Institutional Respite						
SPC	FPC	Benefit Category	Code Description	Unit Type	Provider Type	
					Group Home	Residential Care Center
103.24	S5151	Respite care, institutional	Respite care, not in the home, per diem	Day	Each Group Home and Residential Care Center will be paid at the rate approved by the Department of Children and Families (DCF), based on DCF published maximum daily rates. Approved rates by provider can be found at the following link: <a href="https://dcf.wisconsin.gov/ratereg">https://dcf.wisconsin.gov/ratereg</a>	
Daily Living Skills Training					Provider Type	
					Individual	Agency
110.00	T2013	Daily living skills training	Habilitation, educational, waiver; per hour	Hour	22.00	38.00
110.00	T2017	Daily living skills training	Habilitation, residential, waiver; 15 minutes	15-min.	5.50	9.50
<b>Note:</b> Maximum Hourly and 15-minute Group Rates for Daily living skills training (FPC's T2013 and T2017) apply for groups of 2-3 participants. The maximum group size for one caretaker is three participants.				Per child, Group of 2, hour	13.75	23.75
				Per child, Group of 3, hour	9.17	15.83
				Per child, Group of 2, 15-min.	3.44	5.94
				Per child, Group of 3, 15-min.	2.29	3.96
Mentoring						
513.00	H0038	Mentoring	Self-help/peer services, per 15 minutes	15-min.	4.12	6.00
<b>Note:</b> Maximum 15-minute Group Rates for Mentoring (FPC H0038) apply for groups of 2-3 participants. The maximum group size for one caretaker is three participants.				Per child, Group of 2, 15-min.	2.58	3.75
				Per child, Group of 3, 15-min.	1.72	2.50
Supportive Home Care – Personal Care						
104.21	T1019	Supportive Home Care – personal care	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/IDD or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant)	15-min.	4.18	

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<b>Transportation</b>					
107.30	T2003	Transportation & escort	Non-emergency transportation; encounter/trip	1 trip	26.80
107.30	T2004	Transportation – multi-passenger vehicle	Non-emergency transport; commercial carrier, multi-pass	1 trip	26.80
<b>Counseling and Therapeutic Services</b>					
507.03	97166	Counseling & therapeutic services - occupational therapy	Occupational therapy evaluation	Session	62.66
507.03	97168	Counseling & therapeutic services - occupational therapy	Reevaluation of occupational therapy	Session	62.66
507.03	97535	Counseling & therapeutic services - occupational therapy	Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact, each 15 minutes	15-min.	19.84
507.03	97162	Counseling & therapeutic services - physical therapy	Physical therapy evaluation	Session	62.66
507.03	97164	Counseling & therapeutic services - physical therapy	Physical therapy reevaluation	Session	62.66
507.03	97110	Counseling & therapeutic services - occupational therapy or physical therapy	Therapeutic procedure(s) (2 or more individuals)	15-min.	16.47
507.03	97150	Counseling & therapeutic services - occupational therapy or physical therapy	Therapeutic procedure, one or more areas, each 15 minutes, therapeutic exercises to develop strength and endurance, gait training	Session	4.00
507.03	92523	Counseling & therapeutic services - speech and language therapy	Evaluation of language comprehension and expression (e.g., receptive and expressive language)	Session	48.63
507.03	92507	Counseling & therapeutic services - speech and language therapy	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Session	45.63
507.03	92508	Counseling & therapeutic services - speech and language therapy	Treatment of speech, language, voice, communication, and/or auditory processing disorder; Group 2 or more	Session	26.95
<b>Nursing Services</b>					
710.00	S9123	Nursing Services (Independent, Private Duty Nursing, Skilled Nursing), RN	Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used)	Hour	35.96
710.00	S9124	Nursing Services (Independent Private Duty Skilled Nursing), LPN	Nursing care, in the home; by licensed practical nurse, per hour	Hour	23.97

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Child Care Rates					Child Care Provider Type						
					Individual – Family Child Care Provider			Agency – Group Center Child Care Provider			
SPC	FPC	Benefit Category	Code Description	Unit Type	0-5 years old (U1)	6-11 years old (U2)	12 years old And over (U3)	0-5 years old (U1)	6-11 years old (U2)	12 years old And over (U3)	
101.00	T2026	Specialized Child Care	Specialized child care, Waiver, per diem	Day	18.00	14.00	55.00	22.00	15.00	58.00	
101.00	T2027	Specialized Child Care	Specialized child care, waiver; per 15 minutes	15-min.	0.65	0.50	2.00	0.80	0.55	2.10	
Care Level and Provider Type Based Rates						Provider Type					
						Individual			Agency		
						Care Level					
SPC	FPC	Benefit Category	Code Description	Unit Type	Low (U1)	Medium (U2)	High (U3)	Low (U1)	Medium (U2)	High (U3)	
103.26	T1005	Respite Care, Home Based	Respite Care Services up to 15 minutes	15-min.	3.00	4.00	5.00	7.00	8.00	9.00	
103.22	S5150	Respite Care, Residential	Unskilled respite care, not hospice; per 15 minutes	15-min.							
103.99	S5150	Respite Care, Other	Unskilled respite care, not hospice; per 15 minutes	15-min.							
Note: Maximum 15-minute Group Rates for Respite (FPC’s S5150 and T1005) apply for groups of 2-3 participants at all care levels. The maximum group size for one caretaker is three participants.				Per child, Group of 2, 15-min.	2.50			5.00			
						Note: A day unit may be authorized when the total consecutive time of direct care service is greater than 8 and up to 24 hours					
103.26	S9125	Respite Care, Home Based	Respite care, in the home, per diem	Day	175.00	235.00	290.00	405.00	465.00	525.00	
103.22	S5151	Respite care, residential	Unskilled respite care, not hospice, per diem	Day	146.88			290.63			
103.99	S5151	Respite care, other	Unskilled respite care, not hospice, per diem	Day	97.92			193.75			
103.99	G0176EY	Respite care, other	Activity therapy, such as music, hippotherapy, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling health problems, per session (45 minutes or more)	Session	12.00	16.00	20.00	28.00	32.00	36.00	
Note: Maximum Session Group Rates for Respite (FPC G0176EY) apply for groups of 2-3 participants at all care levels. The maximum group size for one caretaker is three participants.				Per child, Group of 2, Session	10.00			20.00			
				Per child, Group of 3, Session	6.67			13.33			

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Supportive Home Care										
104.20	99600	Supportive Home care – hourly	Unlisted home visit service or procedure	Hour	12.00	16.00	20.00	28.00	32.00	36.00
104.20	S5125	Supportive home care - attendant care services; per 15 minutes	Attendant care services; per 15 minutes	15-min	3.00	4.00	5.00	7.00	8.00	9.00
<b>Note:</b> Maximum Hourly and 15-minute Group Rates for Supportive home care (FPCs 99600 and S5125, respectively) apply for groups of 2-3 participants at all care levels. The maximum group size for one caretaker is three participants.				Per child, Group of 2, Hour	10.00			20.00		
				Per child, Group of 3, Hour	6.67			13.33		
				Per child, Group of 2, 15-min	2.50			5.00		
				Per child, Group of 3, 15-min.	1.67			3.33		



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